

**In the Matter of the Accusation
Against:**

Case No. 800-2015-013604

Respondent

The attached Stipulated Settlement and Disciplinary Order is hereby adopted as the Decision and Order of the Medical Board of California, Department of Consumer Affairs, State of California.

IT IS SO ORDERED: October 19, 2017.

Michelle Anne Bluestein

Michelle Anne Bholat, M.D., Chair
Panel B

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10 **BEFORE THE**
11 **MEDICAL BOARD OF CALIFORNIA**
12 **DEPARTMENT OF CONSUMER AFFAIRS**
STATE OF CALIFORNIA

13 In the Matter of the Accusation Against:

14 **JEFFREY PHILIP SAFER, M.D.**
42 Corniche Drive, Unit A
15 Dana Point, CA 92629

16 **Physician's and Surgeon's Certificate**
17 **No. G42819,**

18 Respondent.

Case No. 800-2015-013604

OAH No. 2017070411

STIPULATED SETTLEMENT AND
DISCIPLINARY ORDER

19
20 IT IS HEREBY STIPULATED AND AGREED by and between the parties to the above-
21 entitled proceedings that the following matters are true:

22 **PARTIES**

23 1. Kimberly Kirchmeyer (complainant) is the Executive Director of the Medical Board
24 of California (Board). She brought this action solely in her official capacity and is represented in
25 this matter by Xavier Becerra, Attorney General of the State of California, by Michael J. Yun,
26 Deputy Attorney General.

27 2. Respondent Jeffrey Philip Safer, M.D. (respondent) is representing himself in this
28 proceeding and has chosen not to exercise his right to be represented by counsel.

1 3. On or about July 25, 1980, the Board issued Physician's and Surgeon's Certificate
2 No. G42819 to Jeffrey Philip Safer, M.D. (respondent). The Physician's and Surgeon's
3 Certificate was in full force and effect at all times relevant to the charges brought in Accusation
4 No. 800-2015-013604, and will expire on October 31, 2017, unless renewed.

5 **JURISDICTION**

6 4. On or about June 7, 2017, Accusation No. 800-2015-013604 was filed before the
7 Medical Board of California (Board), and is currently pending against respondent. The
8 Accusation and all other statutorily required documents were properly served on respondent on
9 June 7, 2017. Respondent timely filed his Notice of Defense contesting the Accusation.

10 5. A copy of Accusation No. 800-2015-013604 is attached as Exhibit A and
11 incorporated herein by reference.

12 **ADVISEMENT AND WAIVERS**

13 6. Respondent has carefully read, and fully understands the charges and allegations in
14 Accusation No. 800-2015-013604, and the effects of this Stipulated Settlement and Disciplinary
15 Order on his Physician's and Surgeon's Certificate No. G42819.

16 7. Respondent is fully aware of his legal rights in this matter, including the right to a
17 hearing on the charges and allegations in the Accusation No. 800-2015-013604; the right to be
18 represented by counsel at his own expense; the right to confront and cross-examine the witnesses
19 against him; the right to present evidence and to testify on his own behalf; the right to the
20 issuance of subpoenas to compel the attendance of witnesses and the production of documents;
21 the right to reconsideration and court review of an adverse decision; and all other rights accorded
22 by the California Administrative Procedure Act, the California Code of Civil Procedure, and other
23 applicable laws.

24 8. Respondent voluntarily, knowingly, and intelligently waives and gives up each and
25 every one of the rights set forth and/or referenced above.

26 **CULPABILITY**

27 9. Respondent admits the truth of each and every charge and allegation in Accusation
28 No. 800-2015-013604.

10. Respondent agrees that his Physician's and Surgeon's Certificate No. G42819 is subject to discipline and he agrees to be bound by the Board's probationary terms as set forth in the Disciplinary Order below.

CONTINGENCY

11. The parties agree that this Stipulated Settlement and Disciplinary Order shall be submitted to the Board for its consideration in the above-entitled matter and, further, that the Board shall have a reasonable period of time in which to consider and act on this Stipulated Settlement and Disciplinary Order after receiving it. By signing this stipulation, respondent fully understands and agrees that he may not withdraw his agreement or seek to rescind this stipulation prior to the time that the Board considers and acts upon it.

12. The parties agree that this Stipulated Settlement and Disciplinary Order shall be null and void and not binding upon the parties unless approved and adopted by the Board, except for this paragraph, which shall remain in full force and effect. Respondent fully understands and agrees that in deciding whether or not to approve and adopt this Stipulated Settlement and Disciplinary Order, the Board may receive oral and written communication from its staff and/or the Attorney General's Office. Communications pursuant to this paragraph shall not disqualify the Board, any member thereof, and/or any other person from future participation in this or any other matter affecting or involving respondent. In the event that the Board, in its discretion, does not approve and adopt this Stipulated Settlement and Disciplinary Order, with the exception of this paragraph, it shall not become effective, shall be of no evidentiary value whatsoever, and shall not be relied upon or introduced in any disciplinary action by either party hereto. Respondent further agrees that should the Board reject this Stipulated Settlement and Disciplinary Order for any reason, respondent will assert no claim that the Board, or any member thereof, was prejudiced by its/his/her review, discussion and/or consideration of this Stipulated Settlement and Disciplinary Order or of any matter or matters related hereto.

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1 A professionalism program taken after the acts that gave rise to the charges in the
2 Accusation, but prior to the effective date of the Decision may, in the sole discretion of the Board
3 or its designee, be accepted towards the fulfillment of this condition if the program would have
4 been approved by the Board or its designee had the program been taken after the effective date of
5 this Decision.

6 Respondent shall submit a certification of successful completion to the Board or its
7 designee not later than 15 calendar days after successfully completing the program or not later
8 than 15 calendar days after the effective date of the Decision, whichever is later.

9 3. **SOLO PRACTICE PROHIBITION** Respondent is prohibited from engaging in
10 the solo practice of medicine. Prohibited solo practice includes, but is not limited to, a practice
11 where: 1) Respondent merely shares office space with another physician but is not affiliated for
12 purposes of providing patient care, or 2) respondent is the sole physician practitioner at that
13 location.

14 If respondent fails to establish a practice with another physician or secure employment in an
15 appropriate practice setting within 60 calendar days of the effective date of this Decision,
16 respondent shall receive a notification from the Board or its designee to cease the practice of
17 medicine within three (3) calendar days after being so notified. Respondent shall not resume
18 practice until an appropriate practice setting is established.

19 If, during the course of the probation, respondent's practice setting changes and respondent
20 is no longer practicing in a setting in compliance with this Decision, respondent shall notify the
21 Board or its designee within five (5) calendar days of the practice setting change. If respondent
22 fails to establish a practice with another physician or secure employment in an appropriate
23 practice setting within 60 calendar days of the practice setting change, respondent shall receive a
24 notification from the Board or its designee to cease the practice of medicine within three (3)
25 calendar days after being so notified. Respondent shall not resume practice until an appropriate
26 practice setting is established.

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1 **UNIFORM STANDARDS FOR SUBSTANCE-ABUSING LICENSEES**

2 4. **CLINICAL DIAGNOSTIC EVALUATIONS AND REPORTS** Within thirty
3 (30) calendar days of the effective date of this Decision, and on whatever periodic basis thereafter
4 as may be required by the Board or its designee, respondent shall undergo and complete a clinical
5 diagnostic evaluation, including any and all testing deemed necessary, by a Board-appointed
6 board certified physician and surgeon. The examiner shall consider any information provided by
7 the Board or its designee and any other information he or she deems relevant, and shall furnish a
8 written evaluation report to the Board or its designee.

9 The clinical diagnostic evaluation shall be conducted by a licensed physician and surgeon
10 who holds a valid, unrestricted license, has three (3) years' experience in providing evaluations of
11 physicians and surgeons with substance abuse disorders, and is approved by the Board or its
12 designee. The clinical diagnostic evaluation shall be conducted in accordance with acceptable
13 professional standards for conducting substance abuse clinical diagnostic evaluations. The
14 evaluator shall not have a current or former financial, personal, or business relationship with
15 respondent within the last five (5) years. The evaluator shall provide an objective, unbiased, and
16 independent evaluation. The clinical diagnostic evaluation report shall set forth, in the
17 evaluator's opinion, whether respondent has a substance abuse problem, whether respondent is a
18 threat to himself or others, and recommendations for substance abuse treatment, practice
19 restrictions, or other recommendations related to respondent's rehabilitation and ability to
20 practice safely. If the evaluator determines during the evaluation process that respondent is a
21 threat to himself or others, the evaluator shall notify the Board within twenty-four (24) hours of
22 such a determination.

23 In formulating his or her opinion as to whether respondent is safe to return to either part-
24 time or full-time practice and what restrictions or recommendations should be imposed, including
25 participation in an inpatient or outpatient treatment program, the evaluator shall consider the
26 following factors: respondent's license type; respondent's history; respondent's documented
27 length of sobriety (i.e., length of time that has elapsed since respondent's last substance use);
28 respondent's scope and pattern of substance abuse; respondent's treatment history, medical

1 history and current medical condition; the nature, duration and severity of respondent's substance
2 abuse problem or problems; and whether respondent is a threat to himself or the public.

3 For all clinical diagnostic evaluations, a final written report shall be provided to the Board
4 no later than ten (10) days from the date the evaluator is assigned the matter. If the evaluator
5 requests additional information or time to complete the evaluation and report, an extension may
6 be granted, but shall not exceed thirty (30) days from the date the evaluator was originally
7 assigned the matter.

8 The Board shall review the clinical diagnostic evaluation report within five (5) business
9 days of receipt to determine whether respondent is safe to return to either part-time or full-time
10 practice and what restrictions or recommendations shall be imposed on respondent based on the
11 recommendations made by the evaluator. Respondent shall not be returned to practice until he
12 has at least thirty (30) days of negative biological fluid tests or biological fluid tests indicating
13 that he has not used, consumed, ingested, or administered to himself a prohibited substance, as
14 defined in section 1361.51, subdivision (e), of Title 16 of the California Code of Regulations.

15 Clinical diagnostic evaluations conducted prior to the effective date of this Decision shall
16 not be accepted towards the fulfillment of this requirement. The cost of the clinical diagnostic
17 evaluation, including any and all testing deemed necessary by the examiner, the Board or its
18 designee, shall be borne by the licensee.

19 Respondent shall not engage in the practice of medicine until notified by the Board or its
20 designee that he is fit to practice medicine safely. The period of time that respondent is not
21 practicing medicine shall not be counted toward completion of the term of probation. Respondent
22 shall undergo biological fluid testing as required in this Decision at least two (2) times per week
23 while awaiting the notification from the Board if he is fit to practice medicine safely.

24 Respondent shall comply with all restrictions or conditions recommended by the examiner
25 conducting the clinical diagnostic evaluation within fifteen (15) calendar days after being notified
26 by the Board or its designee.

27 5. **NOTICE OF EMPLOYER OR SUPERVISOR INFORMATION** Within seven
28 (7) days of the effective date of this Decision, respondent shall provide to the Board the names,

1 physical addresses, mailing addresses, and telephone numbers of any and all employers and
2 supervisors. Respondent shall also provide specific, written consent for the Board, respondent's
3 worksite monitor, and respondent's employers and supervisors to communicate regarding
4 respondent's work status, performance, and monitoring.

5 For purposes of this section, "supervisors" shall include the Chief of Staff and Health or
6 Well Being Committee Chair, or equivalent, if applicable, when respondent has medical staff
7 privileges.

8 6. **BIOLOGICAL FLUID TESTING** Respondent shall immediately submit to
9 biological fluid testing, at respondent's expense, upon request of the Board or its designee.
10 "Biological fluid testing" may include, but is not limited to, urine, blood, breathalyzer, hair
11 follicle testing, or similar drug screening approved by the Board or its designee. Respondent shall
12 make daily contact with the Board or its designee to determine whether biological fluid testing is
13 required. Respondent shall be tested on the date of the notification as directed by the Board or its
14 designee. The Board may order respondent to undergo a biological fluid test on any day, at any
15 time, including weekends and holidays. Except when testing on a specific date as ordered by the
16 Board or its designee, the scheduling of biological fluid testing shall be done on a random basis.
17 The cost of biological fluid testing shall be borne by respondent.

18 During the first year of probation, respondent shall be subject to 52 to 104 random tests.
19 During the second year of probation and for the duration of the probationary term, up to five (5)
20 years, respondent shall be subject to 36 to 104 random tests per year. Only if there have been no
21 positive biological fluid tests in the previous five (5) consecutive years of probation, may testing
22 be reduced to one (1) time per month. Nothing precludes the Board from increasing the number
23 of random tests to the first-year level of frequency for any reason.

24 Prior to practicing medicine, respondent shall contract with a laboratory or service,
25 approved in advance by the Board or its designee, that will conduct random, unannounced,
26 observed, biological fluid testing and meets all of the following standards:

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- 1 (a) Its specimen collectors are either certified by the Drug and Alcohol Testing Industry
2 Association or have completed the training required to serve as a collector for the United
3 States Department of Transportation.
- 4 (b) Its specimen collectors conform to the current United States Department of
5 Transportation Specimen Collection Guidelines.
- 6 (c) Its testing locations comply with the Urine Specimen Collection Guidelines published
7 by the United States Department of Transportation without regard to the type of test
8 administered.
- 9 (d) Its specimen collectors observe the collection of testing specimens.
- 10 (e) Its laboratories are certified and accredited by the United States Department of Health
11 and Human Services.
- 12 (f) Its testing locations shall submit a specimen to a laboratory within one (1) business day
13 of receipt and all specimens collected shall be handled pursuant to chain of custody
14 procedures. The laboratory shall process and analyze the specimens and provide legally
15 defensible test results to the Board within seven (7) business days of receipt of the
16 specimen. The Board will be notified of non-negative results within one (1) business day
17 and will be notified of negative test results within seven (7) business days.
- 18 (g) Its testing locations possess all the materials, equipment, and technical expertise
19 necessary in order to test respondent on any day of the week.
- 20 (h) Its testing locations are able to scientifically test for urine, blood, and hair specimens
21 for the detection of alcohol and illegal and controlled substances.
- 22 (i) It maintains testing sites located throughout California.
- 23 (j) It maintains an automated 24-hour toll-free telephone system and/or a secure on-line
24 computer database that allows the Respondent to check in daily for testing.
- 25 (k) It maintains a secure, HIPAA-compliant website or computer system that allows staff
26 access to drug test results and compliance reporting information that is available 24 hours a
27 day.

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1 (l) It employs or contracts with toxicologists that are licensed physicians and have
2 knowledge of substance abuse disorders and the appropriate medical training to interpret
3 and evaluate laboratory biological fluid test results, medical histories, and any other
4 information relevant to biomedical information.

5 (m) It will not consider a toxicology screen to be negative if a positive result is obtained
6 while practicing, even if the Respondent holds a valid prescription for the substance.

7 Prior to changing testing locations for any reason, including during vacation or other travel,
8 alternative testing locations must be approved by the Board and meet the requirements above.

9 The contract shall require that the laboratory directly notify the Board or its designee of
10 non-negative results within one (1) business day and negative test results within seven (7)
11 business days of the results becoming available. Respondent shall maintain this laboratory or
12 service contract during the period of probation.

13 A certified copy of any laboratory test result may be received in evidence in any
14 proceedings between the Board and respondent.

15 If a biological fluid test result indicates respondent has used, consumed, ingested, or
16 administered to himself a prohibited substance, the Board shall order respondent to cease practice
17 and instruct respondent to leave any place of work where respondent is practicing medicine or
18 providing medical services. The Board shall immediately notify all of respondent's employers,
19 supervisors and work monitors, if any, that respondent may not practice medicine or provide
20 medical services while the cease-practice order is in effect.

21 A biological fluid test will not be considered negative if a positive result is obtained while
22 practicing, even if the practitioner holds a valid prescription for the substance. If no prohibited
23 substance use exists, the Board shall lift the cease-practice order within one (1) business day.

24 After the issuance of a cease-practice order, the Board shall determine whether the positive
25 biological fluid test is in fact evidence of prohibited substance use by consulting with the
26 specimen collector and the laboratory, communicating with the licensee, his treating physician(s),
27 other health care provider, or group facilitator, as applicable.

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1 For purposes of this condition, the terms "biological fluid testing" and "testing" mean the
2 acquisition and chemical analysis of respondent's urine, blood, breath, or hair.

3 For purposes of this condition, the term "prohibited substance" means an illegal drug, a
4 lawful drug not prescribed or ordered by an appropriately licensed health care provider for use by
5 respondent and approved by the Board, alcohol, or any other substance respondent has been
6 instructed by the Board not to use, consume, ingest, or administer to himself.

7 If the Board confirms that a positive biological fluid test is evidence of use of a prohibited
8 substance, respondent has committed a major violation, as defined in section 1361.52(a), and the
9 Board shall impose any or all of the consequences set forth in section 1361.52(b), in addition to
10 any other terms or conditions the Board determines are necessary for public protection or to
11 enhance respondent's rehabilitation.

12 7. **SUBSTANCE ABUSE SUPPORT GROUP MEETINGS** Within thirty (30) days
13 of the effective date of this Decision, respondent shall submit to the Board or its designee, for its
14 prior approval, the name of a substance abuse support group which he shall attend for the duration
15 of probation. Respondent shall attend substance abuse support group meetings at least once per
16 week, or as ordered by the Board or its designee. Respondent shall pay all substance abuse
17 support group meeting costs.

18 The facilitator of the substance abuse support group meeting shall have a minimum of three
19 (3) years experience in the treatment and rehabilitation of substance abuse, and shall be licensed
20 or certified by the state or nationally certified organizations. The facilitator shall not have a
21 current or former financial, personal, or business relationship with Respondent within the last five
22 (5) years. Respondent's previous participation in a substance abuse group support meeting led by
23 the same facilitator does not constitute a prohibited current or former financial, personal, or
24 business relationship.

25 The facilitator shall provide a signed document to the Board or its designee showing
26 respondent's name, the group name, the date and location of the meeting, respondent's
27 attendance, and respondent's level of participation and progress. The facilitator shall report any

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unexcused absence by respondent from any substance abuse support group meeting to the Board, or its designee, within twenty-four (24) hours of the unexcused absence.

8. **WORKSITE MONITOR FOR SUBSTANCE-ABUSING LICENSEE** Within thirty (30) calendar days of the effective date of this Decision, respondent shall submit to the Board or its designee for prior approval as a worksite monitor, the name and qualifications of one or more licensed physician and surgeon, other licensed health care professional if no physician and surgeon is available, or, as approved by the Board or its designee, a person in a position of authority who is capable of monitoring respondent at work.

The worksite monitor shall not have a current or former financial, personal, or familial relationship with respondent, or any other relationship that could reasonably be expected to compromise the ability of the monitor to render impartial and unbiased reports to the Board or its designee. If it is impractical for anyone but respondent's employer to serve as the worksite monitor, this requirement may be waived by the Board or its designee, however, under no circumstances shall respondent's worksite monitor be an employee or supervisee of the licensee.

The worksite monitor shall have an active unrestricted license with no disciplinary action within the last five (5) years, and shall sign an affirmation that he or she has reviewed the terms and conditions of respondent's disciplinary order and agrees to monitor respondent as set forth by the Board or its designee.

Respondent shall pay all worksite monitoring costs.

The worksite monitor shall have face-to-face contact with respondent in the work environment on as frequent a basis as determined by the Board or its designee, but not less than once per week; interview other staff in the office regarding respondent's behavior, if requested by the Board or its designee; and review respondent's work attendance.

The worksite monitor shall verbally report any suspected substance abuse to the Board and respondent's employer or supervisor within one (1) business day of occurrence. If the suspected substance abuse does not occur during the Board's normal business hours, the verbal report shall be made to the Board or its designee within one (1) hour of the next business day. A written report that includes the date, time, and location of the suspected abuse; respondent's actions; and

any other information deemed important by the worksite monitor shall be submitted to the Board or its designee within 48 hours of the occurrence.

The worksite monitor shall complete and submit a written report monthly or as directed by the Board or its designee which shall include the following: (1) Respondent's name and Physician's and Surgeon's Certificate number; (2) the worksite monitor's name and signature; (3) the worksite monitor's license number, if applicable; (4) the location or location(s) of the worksite; (5) the dates respondent had face-to-face contact with the worksite monitor; (6) the names of worksite staff interviewed, if applicable; (7) a report of respondent's work attendance; (8) any change in respondent's behavior and/or personal habits; and (9) any indicators that can lead to suspected substance abuse by respondent. Respondent shall complete any required consent forms and execute agreements with the approved worksite monitor and the Board, or its designee, authorizing the Board, or its designee, and worksite monitor to exchange information.

If the worksite monitor resigns or is no longer available, respondent shall, within five (5) calendar days of such resignation or unavailability, submit to the Board or its designee, for prior approval, the name and qualifications of a replacement monitor who will be assuming that responsibility within fifteen (15) calendar days. If respondent fails to obtain approval of a replacement monitor within sixty (60) calendar days of the resignation or unavailability of the monitor, respondent shall receive a notification from the Board or its designee to cease the practice of medicine within three (3) calendar days after being so notified. Respondent shall cease the practice of medicine until a replacement monitor is approved and assumes monitoring responsibility.

9. **VIOLATION OF PROBATION CONDITION FOR SUBSTANCE ABUSING LICENSEES** Failure to fully comply with any term or condition of probation is a violation of probation.

A. If respondent commits a major violation of probation as defined by section 1361.52, subdivision (a), of Title 16 of the California Code of Regulations, the Board shall take one or more of the following actions:

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1 (1) Issue an immediate cease-practice order and order Respondent to undergo a clinical
2 diagnostic evaluation to be conducted in accordance with section 1361.5, subdivision (c)(1), of
3 Title 16 of the California Code of Regulations, at respondent's expense. The cease-practice order
4 issued by the Board or its designee shall state that respondent must test negative for at least a
5 month of continuous biological fluid testing before being allowed to resume practice. For
6 purposes of determining the length of time respondent must test negative while undergoing
7 continuous biological fluid testing following issuance of a cease-practice order, a month is
8 defined as thirty calendar (30) days. Respondent may not resume the practice of medicine until
9 notified in writing by the Board or its designee that he may do so.

10 (2) Increase the frequency of biological fluid testing.

11 (3) Refer respondent for further disciplinary action, such as suspension, revocation, or
12 other action as determined by the Board or its designee.

13 B. If respondent commits a minor violation of probation as defined by section
14 1361.52, subdivision (c), of Title 16 of the California Code of Regulations, the Board shall take
15 one or more of the following actions:

16 (1) Issue a cease-practice order;

17 (2) Order practice limitations;

18 (3) Order or increase supervision of respondent;

19 (4) Order increased documentation;

20 (5) Issue a citation and fine, or a warning letter;

21 (6) Order respondent to undergo a clinical diagnostic evaluation to be conducted in
22 accordance with section 1361.5, subdivision (c)(1), of Title 16 of the California Code of
23 Regulations, at respondent's expense;

24 (7) Take any other action as determined by the Board or its designee.

25 C. Nothing in this Decision shall be considered a limitation on the Board's authority
26 to revoke respondent's probation if he has violated any term or condition of probation. If
27 respondent violates probation in any respect, the Board, after giving respondent notice and the
28 opportunity to be heard, may revoke probation and carry out the disciplinary order that was

1 stayed. If an Accusation, or Petition to Revoke Probation, or an Interim Suspension Order is filed
2 against respondent during probation, the Board shall have continuing jurisdiction until the matter
3 is final, and the period of probation shall be extended until the matter is final.

4 **STANDARD CONDITIONS**

5 10. **NOTIFICATION** Within seven (7) days of the effective date of this Decision,
6 respondent shall provide a true copy of this Decision and Accusation to the Chief of Staff or the
7 Chief Executive Officer at every hospital where privileges or membership are extended to
8 respondent, at any other facility where respondent engages in the practice of medicine, including
9 all physician and locum tenens registries or other similar agencies, and to the Chief Executive
10 Officer at every insurance carrier which extends malpractice insurance coverage to respondent.
11 Respondent shall submit proof of compliance to the Board or its designee within 15 calendar
12 days.

13 This condition shall apply to any change(s) in hospitals, other facilities or insurance carrier.

14 11. **SUPERVISION OF PHYSICIAN ASSISTANTS AND ADVANCED**
15 **PRACTICE NURSES** During probation, respondent is prohibited from supervising physician
16 assistants and advanced practice nurses.

17 12. **OBEY ALL LAWS** Respondent shall obey all federal, state and local laws, all rules
18 governing the practice of medicine in California and remain in full compliance with any court
19 ordered criminal probation, payments, and other orders.

20 13. **QUARTERLY DECLARATIONS** Respondent shall submit quarterly declarations
21 under penalty of perjury on forms provided by the Board, stating whether there has been
22 compliance with all the conditions of probation.

23 Respondent shall submit quarterly declarations not later than 10 calendar days after the end
24 of the preceding quarter.

25 14. **GENERAL PROBATION REQUIREMENTS**

26 **Compliance with Probation Unit**

27 Respondent shall comply with the Board's probation unit.

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1 **Address Changes**

2 Respondent shall, at all times, keep the Board informed of respondent's business and
3 residence addresses, email address (if available), and telephone number. Changes of such
4 addresses shall be immediately communicated in writing to the Board or its designee. Under no
5 circumstances shall a post office box serve as an address of record, except as allowed by Business
6 and Professions Code section 2021(b).

7 **Place of Practice**

8 Respondent shall not engage in the practice of medicine in respondent's or patient's place
9 of residence, unless the patient resides in a skilled nursing facility or other similar licensed
10 facility.

11 **License Renewal**

12 Respondent shall maintain a current and renewed California physician's and surgeon's
13 license.

14 **Travel or Residence Outside California**

15 Respondent shall immediately inform the Board or its designee, in writing, of travel to any
16 areas outside the jurisdiction of California which lasts, or is contemplated to last, more than thirty
17 (30) calendar days.

18 In the event respondent should leave the State of California to reside or to practice,
19 respondent shall notify the Board or its designee in writing 30 calendar days prior to the dates of
20 departure and return.

21 15. **INTERVIEW WITH THE BOARD OR ITS DESIGNEE** Respondent shall be
22 available in person upon request for interviews either at respondent's place of business or at the
23 probation unit office, with or without prior notice throughout the term of probation.

24 16. **NON-PRACTICE WHILE ON PROBATION** Respondent shall notify the Board
25 or its designee in writing within 15 calendar days of any periods of non-practice lasting more than
26 30 calendar days and within 15 calendar days of respondent's return to practice. Non-practice is
27 defined as any period of time respondent is not practicing medicine as defined in Business and
28 Professions Code sections 2051 and 2052 for at least 40 hours in a calendar month in direct

1 patient care, clinical activity or teaching, or other activity as approved by the Board. If
2 respondent resides in California and is considered to be in non-practice, respondent shall comply
3 with all terms and conditions of probation. All time spent in an intensive training program which
4 has been approved by the Board or its designee shall not be considered non-practice and does not
5 relieve respondent from complying with all the terms and conditions of probation. Practicing
6 medicine in another state of the United States or Federal jurisdiction while on probation with the
7 medical licensing authority of that state or jurisdiction shall not be considered non-practice. A
8 Board-ordered suspension of practice shall not be considered as a period of non-practice.

9 In the event respondent's period of non-practice while on probation exceeds 18 calendar
10 months, respondent shall successfully complete the Federation of State Medical Board's Special
11 Purpose Examination, or, at the Board's discretion, a clinical competence assessment program
12 that meets the criteria of Condition 18 of the current version of the Board's "Manual of Model
13 Disciplinary Orders and Disciplinary Guidelines" prior to resuming the practice of medicine.

14 Respondent's period of non-practice while on probation shall not exceed two (2) years.

15 Periods of non-practice will not apply to the reduction of the probationary term.

16 Periods of non-practice for respondent residing outside of California will relieve respondent
17 of the responsibility to comply with the probationary terms and conditions with the exception of
18 this condition and the following terms and conditions of probation: Obey All Laws; General
19 Probation Requirements; Quarterly Declarations; Abstain from the Use of Alcohol and/or
20 Controlled Substances; and Biological Fluid Testing.

21 17. **COMPLETION OF PROBATION** Respondent shall comply with all financial
22 obligations (e.g., restitution, probation costs) not later than 120 calendar days prior to the
23 completion of probation. Upon successful completion of probation, respondent's certificate shall
24 be fully restored.

25 18. **VIOLATION OF PROBATION** Failure to fully comply with any term or
26 condition of probation is a violation of probation. If respondent violates probation in any respect,
27 the Board, after giving respondent notice and the opportunity to be heard, may revoke probation
28 and carry out the disciplinary order that was stayed. If an Accusation, or Petition to Revoke

1 Probation, or an Interim Suspension Order is filed against respondent during probation, the Board
2 shall have continuing jurisdiction until the matter is final, and the period of probation shall be
3 extended until the matter is final.

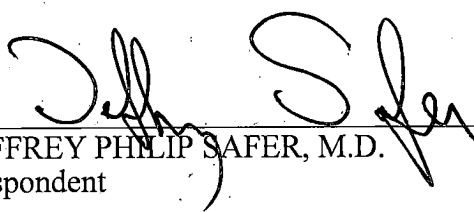
4 19. **LICENSE SURRENDER** Following the effective date of this Decision, if
5 respondent ceases practicing due to retirement or health reasons or is otherwise unable to satisfy
6 the terms and conditions of probation, respondent may request to surrender his license. The
7 Board reserves the right to evaluate respondent's request and to exercise its discretion in
8 determining whether or not to grant the request, or to take any other action deemed appropriate
9 and reasonable under the circumstances. Upon formal acceptance of the surrender, respondent
10 shall within 15 calendar days deliver respondent's wallet and wall certificate to the Board or its
11 designee and respondent shall no longer practice medicine. Respondent will no longer be subject
12 to the terms and conditions of probation. If respondent re-applies for a medical license, the
13 application shall be treated as a petition for reinstatement of a revoked certificate.

14 20. **PROBATION MONITORING COSTS** Respondent shall pay the costs associated
15 with probation monitoring each and every year of probation, as designated by the Board, which
16 may be adjusted on an annual basis. Such costs shall be payable to the Medical Board of
17 California and delivered to the Board or its designee no later than January 31 of each calendar
18 year.

19 **ACCEPTANCE**

20 I have carefully read the Stipulated Settlement and Disciplinary Order. I fully understand
21 the stipulation and the effect it will have on my Physician's and Surgeon's Certificate No.
22 G42819. I enter into this Stipulated Settlement and Disciplinary Order voluntarily, knowingly,
23 and intelligently, and agree to be bound by the Decision and Order of the Medical Board of
24 California.

25
26 DATED: 10/2/12


27 JEFFREY PHILIP SAFER, M.D.
28 Respondent

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ENDORSEMENT

The foregoing Stipulated Settlement and Disciplinary Order is hereby respectfully submitted for consideration by the Medical Board of California.

Dated: 10/5/2017

Respectfully submitted,

XAVIER BECERRA
Attorney General of California
ALEXANDRA M. ALVAREZ
Supervising Deputy Attorney General



MICHAEL J. YUN
Deputy Attorney General
Attorneys for Complainant

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81779617.doc

Exhibit 1

Accusation No. 800-2015-013604

1 XAVIER BECERRA
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2 ALEXANDRA M. ALVAREZ
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3 MICHAEL J. YUN
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8 *Attorneys for Complainant*

10 **BEFORE THE**
11 **MEDICAL BOARD OF CALIFORNIA**
12 **DEPARTMENT OF CONSUMER AFFAIRS**
STATE OF CALIFORNIA

13 In the Matter of the Accusation Against:

Case No. 800-2015-013604

14 **JEFFREY PHILIP SAFER, M.D.**
30400 Camino Capistrano
15 San Juan Capistrano, CA 92675

A C C U S A T I O N

16 **Physician's and Surgeon's Certificate**
17 **No. G 42819,**

18 Respondent.

19
20 Complainant alleges:

21 **PARTIES**

22 1. Kimberly Kirchmeyer (complainant) brings this Accusation solely in her official
23 capacity as the Executive Director of the Medical Board of California.

24 2. On or about July 25, 1980, the Medical Board issued Physician's and Surgeon's
25 Certificate No. G 42819 to Jeffrey Philip Safer, M.D. (respondent). The Physician's and
26 Surgeon's Certificate was in full force and effect at all times relevant to the charges brought
27 herein and will expire on October 31, 2017, unless renewed.

28 ///

JURISDICTION

3. This Accusation is brought before the Board, under the authority of the following laws. All section references are to the Business and Professions Code (Code) unless otherwise indicated.

4. Section 2227 of the Code states:

“(a) A licensee whose matter has been heard by an administrative law judge of the Medical Quality Hearing Panel as designated in Section 11371 of the Government Code, or whose default has been entered, and who is found guilty, or who has entered into a stipulation for disciplinary action with the board, may, in accordance with the provisions of this chapter:

“(1) Have his or her license revoked upon order of the board.

“(2) Have his or her right to practice suspended for a period not to exceed one year upon order of the board.

“(3) Be placed on probation and be required to pay the costs of probation monitoring upon order of the board.

“(4) Be publicly reprimanded by the board. The public reprimand may include a requirement that the licensee complete relevant educational courses approved by the board.

“(5) Have any other action taken in relation to discipline as part of an order of probation, as the board or an administrative law judge may deem proper.

“(b) Any matter heard pursuant to subdivision (a), except for warning letters, medical review or advisory conferences, professional competency examinations, continuing education activities, and cost reimbursement associated therewith that are agreed to with the board and successfully completed by the licensee, or other matters made confidential or privileged by existing law, is deemed public, and shall be made available to the public by the board pursuant to Section 803.1.”

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1 5. Section 2234 of the Code, states, in pertinent part:

2 “The board shall take action against any licensee who is charged with
3 unprofessional conduct. In addition to other provisions of this article, unprofessional
4 conduct includes, but is not limited to, the following:

5 “(a) Violating or attempting to violate, directly or indirectly, assisting in or
6 abetting the violation of, or conspiring to violate any provision of this chapter.

7 “...”

8 6. Unprofessional conduct under Business and Professions Code section 2234 is conduct
9 which breaches the rules or ethical code of the medical profession, or conduct which is
10 unbecoming a member in good standing of the medical profession, and which demonstrates an
11 unfitness to practice medicine. (*Shea v. Board of Medical Examiners* (1978) 81 Cal.App.3d 564,
12 575.)

13 7. Section 2236 of the Code states, in pertinent part:

14 “(a) The conviction of any offense substantially related to the qualifications,
15 functions, or duties of a physician and surgeon constitutes unprofessional conduct
16 within the meaning of this chapter [Chapter 5, the Medical Practice Act]. The record
17 of conviction shall be conclusive evidence only of the fact that the conviction
18 occurred.

19 “...

20 “(d) A plea or verdict of guilty or a conviction after a plea of nolo contendere is
21 deemed to be a conviction within the meaning of this section and Section 2236.1.
22 The record of conviction shall be conclusive evidence of the fact that the conviction
23 occurred.”

24 8. Section 2239 of the Code states:

25 “(a) The use or prescribing for or administering to himself or herself, of any
26 controlled substance; or the use of any of the dangerous drugs specified in Section
27 4022, or of alcoholic beverages, to the extent, or in such a manner as to be dangerous
28 or injurious to the licensee, or to any other person or to the public, or to the extent that

1 such use impairs the ability of the licensee to practice medicine safely or more than
2 one misdemeanor or any felony involving the use, consumption, or self administration
3 of any of the substances referred to in this section, or any combination thereof,
4 constitutes unprofessional conduct. The record of the conviction is conclusive
5 evidence of such unprofessional conduct.

6 “(b) A plea or verdict of guilty or a conviction following a plea of nolo
7 contendere is deemed to be a conviction within the meaning of this section. The
8 Division of Medical Quality¹ may order discipline of the licensee in accordance with
9 Section 2227 or the Division of Licensing may order the denial of the license when
10 the time for appeal has elapsed or the judgment of conviction has been affirmed on
11 appeal or when an order granting probation is made suspending imposition of
12 sentence, irrespective of a subsequent order under the provisions of Section 1203.4 of
13 the Penal Code allowing such person to withdraw his or her plea of guilty and to enter
14 a plea of not guilty, or setting aside the verdict of guilty, or dismissing the accusation,
15 complaint, information, or indictment.”²

16 9. California Code of Regulations, title 16, section 1360, states:

17 “For the purposes of denial, suspension or revocation of a license, certificate or
18 permit pursuant to Division 1.5 (commencing with Section 475) of the code, a crime
19 or act shall be considered to be substantially related to the qualifications, functions or
20 duties of a person holding a license, certificate or permit under the Medical Practice
21 Act if to a substantial degree it evidences present or potential unfitness of a person
22 holding a license, certificate or permit to perform the functions authorized by the

23 ¹ California Business and Professions Code section 2002, as amended and effective January 1,
24 2008, provides that, unless otherwise expressly provided, the term “board” as used in the State Medical
25 Practice Act (Cal. Bus. & Prof. Code, sections 2000, et seq.) mean the “Medical Board of California,” and
references to the “Division of Medical Quality” and “Division of Licensing” in the Act or any other
provision of law shall be deemed to refer to the Board.

26 ² There is a nexus between a physician’s use of alcoholic beverages and his or her fitness to
27 practice medicine, established by the Legislature in section 2239, “in all cases where a licensed physician
28 used alcoholic beverages to the extent or in such a manner as to pose a danger to himself or others.”
(*Watson v. Superior Court (Medical Board)* (2009) 176 Cal.App.4th 1407, 1411.)

1 license, certificate or permit in a manner consistent with the public health, safety or
2 welfare. Such crimes or acts shall include but not be limited to the following:
3 Violating or attempting to violate, directly or indirectly, or assisting in or abetting the
4 violation of, or conspiring to violate any provision of the Medical Practice Act.”

5 **FIRST CAUSE FOR DISCIPLINE**

6 **(Conviction of a Crime Substantially Related to Qualifications,
7 Functions, or Duties of a Physician and Surgeon)**

8 10. Respondent has subjected his Physician's and Surgeon's Certificate No. G 42819 to
9 disciplinary action under sections 2227 and 2234, as defined by section 2236, subdivision (a), of
10 the Code, in that he has been convicted of a crime substantially related to the qualifications,
11 functions, or duties of a physician and surgeon, as more particularly alleged hereinafter:

12 **February 28, 2015 DUI**

13 11. On or about February 28, 2015, Deputy Sheriff Bishop (Deputy Bishop) of
14 Orange County Sheriff's Department (OCSD) was on uniformed patrol duty in a marked
15 Sheriff's patrol car in Laguna Niguel, California when he and OCSD Deputy Phillips were
16 dispatched to Serenity Lane and Golden Lantern in Laguna Niguel regarding a disturbance.

17 12. Reporting Party M.S., respondent's wife, told Sheriff's dispatch (dispatch) that
18 respondent was acting bizarre while driving her car and that he would not pull the car over.
19 She also told dispatch that respondent may have been under the influence. She told dispatch
20 that respondent had left her by driving south on Golden Lantern.

21 13. On or about February 28, 2015, when Deputy Bishop arrived at M.S.'s location,
22 M.S. provided the following statement, in summary:

23 “Respondent and I had been married for 39 years. I recently learned respondent had a
24 history of alcohol abuse. We had recently moved. Respondent has been depressed.
25 Respondent seemed off all day. When respondent was driving me to a hardware store
26 in Aliso Viejo, he had a difficult time staying in his lane and drifted into other lanes
27 of traffic. When I began to criticize his driving, respondent told me that if I did not
28 like his driving, I should drive. I called the OCSD to report respondent acting bizarre.

1 Respondent pulled over, in the area of Serenity Lane and Golden Lantern, to let me
2 drive. When I got out of the car, respondent drove away.”

3 14. After getting the above information from M.S., Deputy Bishop attempted to call
4 respondent on the phone, but he did not answer. M.S. then told Deputy Bishop that
5 respondent most likely went back to their home in Dana Point. Deputy Bishop used his
6 department issued radio to request a Dana Point Deputy be sent to their address to check on
7 the welfare of respondent.

8 15. At approximately 6:28 p.m., a vehicle M.S. identified as respondent’s car drove
9 south bound on Golden Lantern and turned onto Serenity Lane where Deputy Bishop and
10 M.S. were. M.S. identified the driver as respondent. Respondent stopped his car, turned off
11 the ignition, and exited the car without being directed by the officers.

12 16. When Deputy Bishop asked respondent how he was doing, he replied, “I’m
13 doing fine.” When Deputy Bishop walked closer to respondent, to about three feet away
14 from him, and told him that M.S. thought he may be under the influence of something,
15 respondent replied, “No, I’m not under the influence of anything. I’m fine.” When
16 respondent made that statement, Deputy Bishop smelled a strong odor of an alcoholic
17 beverage on respondent’s breath.

18 17. Deputy Bishop informed respondent that he was not under arrest, but being
19 detained. When he asked respondent for his consent to search his body for anything illegal,
20 he replied, “Sure.” Nothing illegal was found on respondent’s person. When Deputy
21 Bishop asked respondent if he would answer some questions to help him determine if
22 respondent was under the influence of alcohol, respondent stated, “Sure.”

23 18. Respondent agreed to perform a series of Field Sobriety Tests which were
24 explained by Deputy Bishop prior to respondent’s attempted performance. During the
25 Horizontal Gaze Nystagmus (HGN) test, respondent’s eyes lacked smooth pursuit, had
26 distinct and sustained nystagmus at maximum deviation with an angle of onset prior to 45
27 degrees, and his eyes were bloodshot, watery, and droopy.

28 ///

1 19. During the One Leg Stand test, respondent began performing the test before
2 Deputy Bishop finished providing instructions. Respondent stumbled to his left, taking one
3 step. This area was flat, debris free, and was illuminated by a street lamp. When Deputy
4 Bishop told respondent to hold on, respondent began walking away. Deputy Bishop told
5 respondent to stop and he complied.

6 20. Deputy Bishop told respondent again that he would explain the test to him,
7 demonstrate the test to him, and then ask him to perform the test. Respondent again began
8 attempting to perform his test before Deputy Bishop was able to demonstrate it for him.
9 Respondent put his raised foot down 2 times before beginning to count. Respondent put his
10 foot down on counts 1, 2, 3, 5, 6, 8, and 10.

11 21. Respondent performed the Rhomberg test relatively well by estimating 30
12 seconds in about 32 seconds; however, Deputy Bishop saw that respondent's eyes had
13 tremors and that his body swayed about 4 inches from side to side during his performance
14 of the test.

15 22. During the Walk and Turn test, respondent again began attempting to perform
16 the test while Deputy Bishop was explaining the test to him. Respondent had to be told to
17 stop three (3) times before he actually stopped. During his first 9 steps, respondent missed
18 heel to toe on steps 2, 3, 4, 5, 6, 7, 8, and 9. After taking these initial 9 steps, respondent
19 stopped and looked at Deputy Bishop for instructions.

20 23. During the Finger to Nose test, respondent missed touching the tip of his nose
21 every time and instead touched the area between the bottom of his nose and his upper lip.

22 24. Deputy Bishop then read respondent the Preliminary Alcohol Screening (PAS)
23 device admonishment and asked him if would take a PAS test. Respondent replied, "Sure."
24 Respondent did not blow in to the device as instructed, therefore the test had to be
25 conducted again. Respondent again did not blow into the device as instructed. The test was
26 conducted again and this time, the manual capture function was used to take his breath
27 sample. Respondent blew a 0.154% blood alcohol content (BAC). Another PAS test was
28 conducted and respondent blew a 0.164% BAC.

1 25. Based on respondent's performance on the FSTs and the results of the PAS test,
2 Deputy Bishop placed respondent under arrest for violations of Vehicle Code section
3 23152, subdivisions (a) and (b) [DUI].

4 26. Deputy Bishop read respondent the chemical test admonition and respondent
5 agreed to a blood test. Respondent then asked to speak to his wife, M.S., and Deputy Bishop
6 allowed him to speak to her. While the couple spoke, M.S. asked respondent when he
7 drank alcohol. Respondent told M.S. that he drank alcohol in the morning.

8 27. Respondent was transported to Orange County Jail where a sample of his blood
9 was taken and sent to the Orange County Crime Lab for toxicology analysis. The
10 toxicology analysis of respondent's blood sample returned a BAC of 0.16%.

11 28. On or about April 15, 2015, in the Superior Court of California, County of
12 Orange, in the case entitled *The People of the State of California v. Jeffrey Philip Safer*,
13 Superior Court Case No. 15HM03822, respondent was charged in Count 1, with a
14 misdemeanor violation of Vehicle Code Section 23152, subdivision (a) [Driving Under the
15 Influence of Alcohol], and in Count 2, with a misdemeanor violation of Vehicle Code
16 Section 23152, subdivision (b) [Driving with Blood Alcohol 0.08% or More. In addition, it
17 was specially alleged pursuant to Vehicle Code Section 23578 that respondent had a BAC
18 of 0.15 % or more.

19 29. On or about October 27, 2015, in the Superior Court of California, County of
20 Orange, in the case entitled *The People of the State of California v. Jeffrey Philip Safer*,
21 Superior Court Case No. 15HM03822, respondent pled Guilty and was convicted of Counts
22 1 and 2, violating Vehicle Code Section 23152, subdivisions (a) and (b). Respondent also
23 admitted the special allegation of Vehicle Code Section 23578, in that he had a BAC of .15
24 percent or more. He specifically admitted to his BAC of 0.16% at the time of his driving.
25 Respondent was sentenced to three (3) years summary probation, 150 days in jail,
26 enrollment in and completion of the 18 Months Multiple Offender Program, and fines and
27 fees.

28 ///

1 **April 11, 2015 DUI**

2 30. On or about April 11, 2015, at about 7:46 p.m., Deputy Sheriff Buechler
3 (Deputy Buechler) of Orange Count Sheriff's Department (OCSD) was on her uniformed
4 patrol duty in the city of Dana Point when she saw respondent drive his 2008 Infiniti EX35
5 through Strands Beach Parking Lot over a raised grass median. Deputy Buechler
6 approached the driver who was the respondent and noticed that he had unsteady gait, slurred
7 speech, strong odor of an alcoholic beverage on his breath, and bloodshot/watery eyes.

8 31. Soon afterwards, Deputy Bowsher of OCSD arrived at the location and
9 conducted a DUI investigation on respondent. Deputy Bowsher asked respondent pre-FST
10 questions. Respondent stated he did not have any physical defects, that he is not diabetic or
11 epileptic, that he had not had any recent surgery, that he had not eaten anything recently,
12 and that he had not taken any medication or drugs.

13 32. Respondent also stated that he had not been drinking any alcoholic beverages.

14 33. Deputy Bowsher asked respondent to perform FSTs. During the HGN test,
15 respondent's eyes exhibited lack of smooth pursuit. Respondent did not perform the
16 Rhomberg test or the Finger to Nose test. When asked to perform the One Leg Stand after
17 explanation and demonstration by Deputy Bowsher, respondent stated, "I can't do this."

18 34. During his attempt of the Walk and Turn test, respondent almost fell over.

19 35. Respondent provided two breath samples for the PAS test. Respondent's breath
20 samples returned BAC of .19% and .20%.

21 36. Deputy Bowsher concluded the signs and symptoms displayed by respondent
22 were consistent with being under the influence of alcohol and that respondent was too
23 impaired to safely operate a motor vehicle. Based on respondent's objective symptoms of
24 alcohol intoxication and his performance on the FSTs, Deputy Bowsher arrested respondent
25 for violation of Vehicle Code section 23152, subdivision (a) [Driving Under the Influence
26 of Alcohol] and Vehicle Code section 23152, subdivision (b) [Driving Under the Influence
27 of Alcohol .08% or More].

28 ///

1 37. After being advised of the Informed Consent Law, respondent provided breath
2 samples for the Portable Evidential Breath Test (PEBT). His samples returned BACs of
3 .21% and .20%.

4 38. On or about July 30, 2015, in the Superior Court of California, County of Orange, in
5 the case entitled *The People of the State of California v. Jeffrey Philip Safer*, Superior Court Case
6 No. 15HM07727, respondent was charged in Count 1, with a misdemeanor violation of Vehicle
7 Code Section 23152, subdivision (a) [Driving Under the Influence of Alcohol], and in Count 2,
8 with a misdemeanor violation of Vehicle Code Section 23152, subdivision (b) [Driving with
9 Blood Alcohol 0.08% or more]. In addition, it was specially alleged pursuant to Vehicle Code
10 Section 23538, subdivision (b)(2), that respondent had a BAC of .20% or more, by weight.

11 39. On or about October 27, 2015, in the Superior Court of California, County of
12 Orange, in the case entitled *The People of the State of California v. Jeffrey Philip Safer*,
13 Superior Court Case No. 15HM07727, respondent pled Guilty and was convicted of Counts
14 1 and 2, violating Vehicle Code Section 23152, subdivisions (a) and (b). Respondent also
15 admitted the special allegation of Vehicle Code Section 23538, subdivision (b)(2), in that he
16 had a BAC of .20% or more. He specifically admitted to his BAC of 0.21% at the time of
17 his driving. Respondent was sentenced to three (3) years summary probation, 150 days in
18 jail, to be served concurrently with his other DUI case in Case No. 15HM03822, enrollment
19 in and completion of the 18 Months Multiple Offender Program, and fines and fees.

20 **SECOND CAUSE FOR DISCIPLINE**

21 **(Use of Alcoholic Beverages to the Extent, or in a Manner, as to be 22 Dangerous to Respondent, Another Person, or the Public)**

23 40. Respondent has further subjected his Physician's and Surgeon's Certificate No.
24 G 42819 to disciplinary action under sections 2227 and 2234, as defined by section 2239,
25 subdivision (a), of the Code, in that he used alcoholic beverages, to the extent, or in such a
26 manner as to be dangerous or injurious to respondent, another person or the public, as more
27 particularly alleged in paragraphs 10 through 39, above, which are hereby incorporated by
28 reference and realleged as if fully set forth herein.

1 **THIRD CAUSE FOR DISCIPLINE**

2 **(General Unprofessional Conduct)**

3 41. Respondent has further subjected his Physician's and Surgeon's Certificate No.
4 G 42819 to disciplinary action under sections 2227 and 2234, as defined by section 2234, of the
5 Code, in that he has engaged in conduct which breaches the rules or ethical code of the medical
6 profession, or conduct which is unbecoming a member in good standing of the medical
7 profession, and which demonstrates an unfitness to practice medicine, as more particularly alleged
8 in paragraphs 10 through 40, above, which are hereby incorporated by reference and realleged as
9 if fully set forth herein.

10 **PRAYER**

11 WHEREFORE, complainant requests that a hearing be held on the matters herein alleged,
12 and that following the hearing, the Medical Board of California issue a decision:

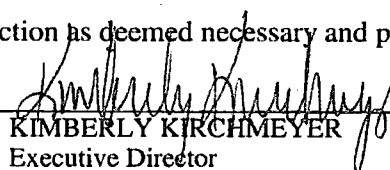
13 1. Revoking or suspending Physician's and Surgeon's Certificate No. G 42819, issued to
14 respondent Jeffrey Philip Safer, M.D.;

15 2. Revoking, suspending or denying approval of respondent Jeffrey Philip Safer, M.D.'s
16 authority to supervise physician assistants, pursuant to section 3527 of the Code, and advanced
17 practice nurses;

18 3. Ordering respondent Jeffrey Philip Safer, M.D. to pay the Medical Board of
19 California the costs of probation monitoring, if placed on probation; and

20 4. Taking such other and further action as deemed necessary and proper.

21 DATED: June 7, 2017

22 
KIMBERLY KIRCHMEYER
Executive Director
Medical Board of California
State of California
Complainant

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